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SUCCESS IN TEACHING MATERIA MEDICA

By MINNIE GOODNOW
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MATERIA Medica is undoubtedly the most difficult subject in a nurse's curriculum, and one which is not always successfully mastered. One finds commonly that about all that the average nurse knows of it at the end of her course is what she has learned in her practical work in the hospital wards. This is hardly an ideal state of affairs, and it can be remedied, to some extent at least, by improved methods in teaching.

First, who shall teach it? Preferably the chief nurse, though it may be done by a doctor, providing he makes it a class, and not a lecture. Materia Medica has rarely been successfully taught by the lecture method; the lecturer almost invariably presupposes knowledge which the nurses do not possess, or tries to cover too much ground in one evening, thereby confusing and discouraging his hearers. The supervising nurse of a large hospital observed recently that a doctor touched on seventy-five drugs in one lecture; it is to be doubted whether the class gained much from the time spent. Therefore, let the teacher be someone who is willing to do a plentiful amount of iteration and reiteration, and who is not in too great haste for results.

Materia Medica should be a first-year study. This, one would think to be self-evident; but a number of hospitals leave it until the second or third year. Meantime, nurses are giving medicines of which they know practically nothing, and are handling poisons, recklessly perhaps, because they do not know that they are poisons. Nurses who did not study Materia Medica until their second year have told me that their first impression of the study was fright over the mistakes which they might have made during their first year.

There should be preliminary lessons on weights and measures, both apothecaries' and metric, with a certain amount of committing to memory of names and definitions. Next, four or five letters on the elements of chemistry should be given by a doctor or practical chemist; simple experiments should accompany these lectures. The hospital druggist might be pressed into service for this part of the work. A little skilful inquiry among nurses will prove how absolutely essential these lectures are. Many nurses have failed to grasp the meaning of Materia

Medica simply because they had not studied chemistry and did not have a clear idea of chemical terms.

After this foundation drudgery, begin the actual study of drugs. It is a pedagogical principle that one must work from the known to the unknown; so, in the first year, let the pupils select the drugs which are to be studied, insisting that they be ones with which the majority of the class is already familiar. Any young woman, be she nurse or not, knows something of the properties of castor oil and vaseline; she does not, however, know all about them, and they are appropriate subjects for first lessons, along with such things as flaxseed, rhubarb, mustard, camphor, some of the soda compounds, licorice, glycerine, turpentine, alcohol, and charcoal. Three drugs at a lesson are enough for good work. By the time the more familiar things are finished the class will be ready to take up carbolic and boric acids, strychnine, chloroform, ether, quinine, the mercurials, cascara, opium and its derivatives, and the commoner drugs used in hospital practice. It is not a serious matter if some really important drugs are omitted from the first year's work; their importance may be better comprehended later on.

Object teaching is always impressive, and should be frequently used. Samples of crude drugs can be obtained at small cost from the large manufacturing druggists, and will be found a valuable aid in fixing substances in mind. A specimen of each preparation studied should be brought into class to be passed around, the color, consistency, shape of crystals, etc., noted, the odor, and when practicable the taste.

At least twice a year there should be a lesson in identification. Specimens of the various preparations which have been studied should be presented, without labels, and the class required to identify them. These classes are great eye-openers to both teacher and pupils, and are efficient preventives of some of the common mistakes in giving medicines.

A list of the commoner poisons and their antidotes might be posted in the medicine room off each ward. From these the nurses will learn almost unconsciously. A Materia Medica should be a part of the furnishing of each medicine room, and the head nurses should see that the pupils look up each drug as they have occasion to give it. Nurses ought to be encouraged to ask the doctors, or at any rate the internes, why drugs are given and what effects may be looked for. It will not be found that the doctors resent this, but that they will be more likely to take it as an indication of interest in the work.

SUGGESTIVE MODEL FOR RECORD. PAGE 1

Name................................
Address ....

Age........................
Nationality................

Religion ....

Entered..................
Finished..................

Dropped......................
Readmitted....................

Date	PRELIMINARY			MEDICAL								SURGICAL								Operating Room	Children		Gynaecological		Obstetrical		Private Patients
				Ward....		Ward....		Ward....		Contagious		Ward....		Ward....		Ward....		Ward....									
				Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night		Day	Night	Day	Night	Day	Night	

SUGGESTIVE MODEL FOR RECORD BOOK. PAGE 2

Affiliation Training	Diet Kitchen	In charge	REMARKS	Vacation	Illness	Absence for other causes

SUGGESTIVE MODEL FOR RECORD BOOK. PAGE 3

THEORETICAL WORK

Date	CLASSES					LECTURES			DEMONSTRATIONS	EXAMINATIONS	
	Anatomy and Physiology	Nursing	Materia Medica	Bacteriology and Labaratory		Subject	Lecturer	Rating on Notes		Subject	Rating